

Planning and Land Use Services

Building • Health • Historic District Commission • Planning Board • Zoning Board of Appeals

BUILDING DIVISION

APPLICATION FOR ROOF and SIDEWALL SHINGLING

OWNER OF RECORD:			PHONE#:	
LOCA	TION OF WORK:			
ASSES	SORS MAP#:	PARC	PARCEL#:	
OWNE	RS ADDRESS:			
NAME	OF CONTRACTOR:		LICENSE#:	
PI FAS	E COMPLETE APPLICABLE SE	FCTIONS:		
			OR CLABOARD	
			 MATERIAL	
3.				
	ELECTRICAL METER	ELECTRIC SERVICE DROP	AND/OR GAS REGULATOR	
	IF YES TO ANY OF THE AB SERVICE CONNECTIONS:	OVE, PLEASE LIST THE NAMI	E(S) OF WHO WILL PERFORM THE REQUIRE	
	ELECTRICIAN	AND/OR GA	S INSTALLER	
4.	ESTIMATE OF TOTAL COST	OF WORK:		
5.	IS FIRE RESISTIVE CONSTRU	UCTION REQUIRED?	IF YES, METHOD:	
6.	HISTORIC DISTRICT COMMI	SSION APPROVAL REQUIRED _	NOT REQUIRED	
7.	HDC CERTFICIATE NUMBER	R HDC FINAL	DATE	
SIGNA	TURE OF APPLICANT		DATE	
			DATE	
		FOR OFFICE USE	ONLY	
ELECTRICAL PERMIT#		GAS PERMIT#	BLDG. PERMIT#	
DENIAL DATE		APP	ROVAL DATE	
			SIGNATURE OF BUILDING OFFI	

THE APPLICANT/CONTRACTOR/HOMEOWNER ACCEPTING THIS PERMIT SHALL CONFORM TO ALL PROVISIONS OF THE STATUTES AND ORDINANCES RELATING TO THE CONSTRUCTION, MAINTENANCE AND INSPECTION OF BUILDINGS IN THE TOWN OF NANTUCKET AND THE MASSACHUSETTS STATE BUILDING CODE 780 CMR. THIS PERMIT SHALL BECOME INVALID SIX MONTHS FROM THE DATE OF ISSUE IF THE WORK PERMITTED HAS NOT COMMENCED OR IS NOT PROCEEDING CONTINUOUSLY TO COMPLETION AS FAR AS REASONABLY PRACTICABLE. THIS PERMIT MUST BE DISPLAYED IN A CONSPICUOUS PLACE ON THE PREMISES.